

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF NEBRASKA**

In re Dimensions In Senior Living, LLC et)	Case No. 22-80860
al., ¹)	
)	Chapter 11
Debtors.)	
)	Joint Administered

**SUPPORT DOCUMENT TO SCHEDULES AND
STATEMENT OF FINANCIAL AFFAIRS**

The following notes regarding the Statement of Financial Affairs and Schedules (collectively the “Schedules”) are fully incorporated into and made part of the Schedules. These notes comprise an integral part of the Schedules and should be referred to and considered in connection with any review of the Schedules.

The Schedules should not be deemed to represent financial statements and contain unaudited information. The Schedules reflect the Debtor’s reasonable efforts to report known assets and liabilities. In preparing the Schedules, the Debtor relied upon information and advice obtained from books and records, members, third parties, and professionals. Though the Debtor has made reasonable efforts to ensure the accuracy of the Schedules, these efforts are ongoing and the Schedules remain subject to change or amendment (both material and immaterial) in the event the Debtor discovers inadvertent mistakes or omissions, conflicting information, or new information.

Nothing contained in the Schedules constitutes a waiver of any of the Debtor’s rights with respect to this chapter 11 case, including, but not limited to, any rights or claims of the Debtor against any third party or issues involving substantive consolidation, equitable subordination, or defenses or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code or any other relevant applicable bankruptcy or non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in these notes does not limit in any respect the general reservation of rights contained in this paragraph. Nothing contained in the Schedules is intended or should be construed as an admission or stipulation of the validity of any claim against the Debtor, any assertion made therein or herein, or a waiver of the Debtor’s rights to dispute any claim or assert any cause of action or defense against any party.

Notwithstanding that the Debtor has made reasonable efforts to correctly characterize, classify, categorize, or designate certain claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules, the Debtor nonetheless may have incorrectly characterized,

¹ Dimensions In Senior Living, LLC, Tax I.D. No. 76-0771058, Village Ridge, LLC, Tax I.D. No. 20-3042744, Village Place, LLC, Tax I.D. No. 81-2042780, WB Real Estate Of Iola, LLC, Tax I.D. No. 46-5548614, Humboldt Assisted Living LLC, Tax I.D. No. 48-1221950, Wilcox Properties Of Columbia, LLC, Tax I.D. No. 43-1934089, Wilcox Properties Of Fort Calhoun, LLC, Tax I.D. No. 20-5822304.

classified, categorized, or designated certain items. The Debtor thus reserves all rights to recharacterize, reclassify, recategorize, or redesignate items reported in the at a later time as is necessary and appropriate.

Listing: (i) a claim on Schedule D as “secured,”; (ii) a claim on Schedule E/F as “priority” or “unsecured,”; (iii) a contract on Schedule G as “executory” or “unexpired”; or (iv) as a co-debtor on Schedule H does not constitute an admission by the Debtor of the legal rights of the claimant or contract counterparty, or a waiver of the Debtor’s rights to recharacterize or reclassify such claim or contract.

Any failure to designate a claim on a given Debtor’s Schedules as “disputed,” “contingent,” or “unliquidated” does not constitute an admission by the Debtor that such amount is not “disputed,” “contingent,” or “unliquidated.” The Debtor reserves all rights to dispute, or assert offsets or defenses to, any claim reflected on its Schedule on any grounds, including, without limitation, liability or classification, or to otherwise subsequently designate such claims as “disputed,” “contingent,” or “unliquidated” or object to the extent, validity, enforceability, priority, or avoidability of any claim. Moreover, listing a claim does not constitute an admission of liability by the Debtor against which the claim is listed or by any of the Debtor. The Debtor reserves all rights to amend its Schedules as necessary and appropriate, including, but not limited to, with respect to claim description and designation.

The preparation of the Schedules required the Debtor to make reasonable estimates and assumptions with respect to the reported amounts of assets and liabilities, the amount of contingent assets and contingent liabilities on the date of the Schedules, and the reported amounts of revenues and expenses during the applicable reporting periods. Actual results could differ from such estimates.

Despite reasonable efforts, the Debtor may not have identified and/or set forth all of its causes of action (filed or potential) against third parties as assets in its Schedules, including, without limitation, avoidance actions arising under chapter 5 of the Bankruptcy Code and actions under other relevant bankruptcy and non-bankruptcy laws to recover assets. The Debtor reserves all rights with respect to any causes of action, and nothing in these notes or the Schedules should be construed as a waiver of any such causes of action.

In the circumstance where the Schedules require information regarding “insiders” the Debtor has included information with respect to the individuals who the Debtor believes are included in the definition of “insider” set forth in section 101(31) of the Bankruptcy Code during the relevant time periods. Such individuals may no longer serve in such capacities. The listing of a party as an insider for purposes of the Schedules is not intended to be, nor should it be, construed an admission of any fact, right, claim, or defense, and all such rights, claims, and defenses are hereby expressly reserved. Information regarding the individuals listed as insiders in the Schedules has been included for informational purposes only and such information may not be used for the purposes of determining control of the Debtor, the extent to which any individual exercised management responsibilities or functions, corporate decision-making authority over the Debtor, or whether such individual could successfully argue that he or she is not an insider under applicable law, including the Bankruptcy Code and federal securities laws, or with respect to any theories of liability or any other purpose.

The Schedules have been signed by an authorized representative of the Debtor. In reviewing and signing the Schedules, this representative relied upon information, advice, and documents obtained from books and records, board members, third parties, and professionals. The authorized representative has signed the Schedules to the best of his or her knowledge with the understanding with the information contained in the Schedules is subject to change and ongoing review.

Respectfully submitted,

Dimensions In Senior Living, LLC, Village Ridge, LLC, Village Place, LLC, WB Real Estate Of Iola, LLC, Humboldt Assisted Living LLC, Wilcox Properties Of Columbia, LLC, and Wilcox Properties Of Fort Calhoun, LLC, Debtors.

By: /s/ Patrick R. Turner
TURNER LEGAL GROUP, LLC
Patrick Turner (NE Bar No. 23461)
139 S. 144th Street, Suite 665
Omaha, Nebraska 68010
Telephone: (402) 690-3675
pturner@turnerlegalomaha.com

Counsel for Debtors.

Fill in this information to identify the case:

Debtor name Village Ridge, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 22-80863

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 4, 2023

X /s/ Amy Wilcox-Burns

Signature of individual signing on behalf of debtor

Amy Wilcox-Burns

Printed name

Chief Restructuring Officer

Position or relationship to debtor

Fill in this information to identify the case:Debtor name Village Ridge, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEBRASKACase number (if known) 22-80863☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1.	<u>American National Bank Operating</u>	<u>Checking</u>	<u>7846</u>	<u>\$11.74</u>
3.2.	<u>American National Bank Payroll</u>	<u>checking</u>	<u>7853</u>	<u>\$11.74</u>
3.3.	<u>American National Bank Petty Cash</u>	<u>checking</u>	<u>7868</u>	<u>\$11.74</u>
3.4.	<u>American National Bank</u>	<u>Money Market</u>	<u>1783</u>	<u>\$4,197.68</u>
3.5.	<u>American National Bank Security Deposits</u>	<u>checking</u>	<u>5998</u>	<u>\$13,283.11</u>
3.6.	<u>Farmers State Bank Operating</u>	<u>checking</u>	<u>8171</u>	<u>\$86,270.03</u>

Debtor **Village Ridge, LLC**

Case number (If known) **22-80863**

Name

3.7. **Farmers State Bank Payroll**

checking

8189

\$17,173.64

3.8. **Farmers State Bank Petty Cash**

Checking

8197

\$521.80

4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$121,481.48

Part 2: **Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
- ☐ Yes Fill in the information below.

Part 3: **Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: **5,299.50** - **0.00** = **\$5,299.50**

face amount doubtful or uncollectible accounts

11b. Over 90 days old: **0.00** - **0.00** =.... **\$0.00**

face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$5,299.50

Part 4: **Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

Part 5: **Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				

Debtor Village Ridge, LLC

Case number (If known) 22-80863

Name

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**
See Attachment to
Schedule Item 39/41

Unknown

\$0.00

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$0.00

24. **Is any of the property listed in Part 5 perishable?**
☐ No
☒ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**
☒ No
☐ Yes. Book value Valuation method Current Value

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 6: **Farming and fishing-related assets (other than titled motor vehicles and land)**

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**
☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: **Office furniture, fixtures, and equipment; and collectibles**

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**
☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture See Attachment	Unknown	Comparable sale	Unknown
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software See Attachment	Unknown		Unknown

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$0.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**
☒ No

Debtor Village Ridge, LLC Case number (If known) 22-80863
Name

☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 365 Marion Blvd Marion IA 52303 Appraisals have been ordered by the Bank and will be updated accordingly.	Fee Simple	\$0.00	Appraisal 2018	\$10,010,000.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$10,010,000.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

Debtor	<u>Village Ridge, LLC</u>		Case number (If known)	<u>22-80863</u>
	Name			

61.	Internet domain names and websites <u>www.marionvillages.com</u>	<u>\$0.00</u>	<u>Unknown</u>
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62.	Licenses, franchises, and royalties <u>IA Assisted Living</u> <u>Linn County Food Service</u> <u>CLIA</u>	<u>\$0.00</u>	<u>Unknown</u>
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63.	Customer lists, mailing lists, or other compilations <u>Resident List</u>	<u>\$0.00</u>	<u>Unknown</u>
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64.	Other intangibles, or intellectual property		
65.	Goodwill		
66.	Total of Part 10. Add lines 60 through 65. Copy the total to line 89.	<div>\$0.00</div>	
67.	Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
68.	Is there an amortization or other similar schedule available for any of the property listed in Part 10? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
69.	Has any of the property listed in Part 10 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 11:

All other assets

70.	Does the debtor own any other assets that have not yet been reported on this form? Include all interests in executory contracts and unexpired leases not previously reported on this form. <input type="checkbox"/> No. Go to Part 12. <input checked="" type="checkbox"/> Yes Fill in the information below.		
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		Current value of debtor's interest
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71.	Notes receivable Description (include name of obligor)	
72.	Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local)	
73.	Interests in insurance policies or annuities	
74.	Causes of action against third parties (whether or not a lawsuit has been filed) <u>Counter and Setoff Claims against Champions Contractors.</u>	<u>Unknown</u>
	Nature of claim	
	<u>Breach of Contract.</u>	
	Amount requested	<u>\$0.00</u>

Debtor	<u>Village Ridge, LLC</u> Name	Case number (If known)	<u>22-80863</u>
75.	Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims		
76.	Trusts, equitable or future interests in property		
77.	Other property of any kind not already listed <i>Examples:</i> Season tickets, country club membership		
	<u>Insurance Proceeds held by Berkadia.</u>		<u>\$180,000.00</u>

78.	Total of Part 11. Add lines 71 through 77. Copy the total to line 90.	<div>\$180,000.00</div>
79.	Has any of the property listed in Part 11 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Village Ridge, LLC**
NameCase number (If known) **22-80863****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$121,481.48	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$5,299.50	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$10,010,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$180,000.00	
91. Total. Add lines 80 through 90 for each column	\$306,780.98	+ 91b. \$10,010,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$10,316,780.98

**Village Ridge
A/R Aging Summary**

As of November 30, 2022

	Current	1 - 30	31 - 60	61 - 90	> 90	TOTAL
Village Ridge Resident 15	800.00	0.00	0.00	0.00	0.00	800.00
Village Ridge Resident 24	750.00	0.00	0.00	0.00	3,169.50	3,919.50
Village Ridge Resident 30	1,330.00	0.00	0.00	0.00	-750.00	580.00
TOTAL	2,880.00	0.00	0.00	0.00	2,419.50	5,299.50

Attachment to Schedule B Item 11

Quantity	Inventory Item	Value
	Gas Stove with Griddle	\$ 6,000.00
2	One door reach in refrigerator	\$ 3,500.00
2	Stainless steel stand	\$ 1,000.00
1	Fryer	\$ 1,000.00
	Two door convection oven	\$ 3,000.00
1	Steam table	\$ 5,000.00
3	Stainless steel table	\$ 3,000.00
3	Stainless steel cart	\$ 600.00
	Dish machine with returns	\$ 5,000.00
	Bakers Cart	\$ 1,000.00
	Ice Machine	\$ 3,500.00
3	compartment sink	\$ 2,500.00
	Stainless steel table with double sink	\$ 1,600.00
	Food warmer	\$ 900.00
	Food processeor	\$ 300.00
	Floor stand mixer	\$ 1,500.00
7	Stainless Steel Shelves	\$ 2,100.00
2	Can Rack	\$ 1,500.00
	Walk in Freezer	\$ 10,000.00
	Walk in Cooler	\$ 10,000.00
	Food inventory	\$ 5,000.00
	Kitchen paper, disposable goods	\$ 2,000.00
	Dishware, silverware, glasses	\$ 7,000.00
	Pots, pans, food storage, utensils	\$ 7,500.00
	Linens	\$ 1,500.00
	6 foot folding table	\$ 150.00
	Popcorn machine	\$ 350.00
	Dining Tables	\$ 10,000.00
	Dining Chairs	\$ 20,000.00
	Upright piano	\$ 2,000.00
	Exercise and therapy equipment	\$ 3,000.00
	Common area furniture	\$ 75,000.00
	Wooden Bird Aviary	\$ 3,500.00
4	Television	\$ 5,000.00
	Respite furniture	\$ 5,000.00
	Outdoor furniture	\$ 7,000.00
	Medical supplies	\$ 3,500.00
	Nursing equipment	\$ 3,000.00
	Housekeeping equipment	\$ 5,000.00
	Housekeeping supplies	\$ 1,000.00
8	Washers	\$ 4,800.00
8	Dryers	\$ 4,800.00
	Maintenance equipment	\$ 5,000.00
	Call System	\$ 25,000.00
	Phone System	\$ 10,000.00
8	Computers	\$ 8,000.00

	Computer equipment	\$	5,000.00
	Activity supplies	\$	2,000.00
	Holiday decorations	\$	3,500.00
	Office supplies	\$	1,000.00
10	Desks	\$	5,000.00
10	Chairs	\$	3,000.00
	File Cabinets	\$	2,000.00
	Storage Shelves	\$	2,500.00
47	Refrigertors	\$	47,000.00
42	Microwaves	\$	12,600.00
	Breakroom Furniture	\$	3,500.00
	Beauty Salon	\$	5,000.00
		\$	379,200.00

Fill in this information to identify the case:

Debtor name **Village Ridge, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**Case number (if known) **22-80863**☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	Champion Contractors & Services Creditor's Name 2300 Greenhill Dr. Suite 600 Round Rock, TX 78664 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number	Describe debtor's property that is subject to a lien 365 Marion Blvd, Marion IA 52303 Describe the lien Judgment Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$181,067.80 Unknown

2.2	Fannie Mae Creditor's Name C/O Berkadia Commercial Mortgage, LLC 521 Fifth Avenue. 20th Flr. New York, NY 10175 Creditor's mailing address Creditor's email address, if known Date debt was incurred 2018 Last 4 digits of account number 0761	Describe debtor's property that is subject to a lien 365 Marion Blvd, Marion IA 52303 Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	\$5,012,209.00 \$10,010,000.00
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Debtor	Village Ridge, LLC	Case number (if known)	22-80863
<small>Name</small>			
Do multiple creditors have an interest in the same property?		As of the petition filing date, the claim is:	
<input checked="" type="checkbox"/> No		Check all that apply	
<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.	\$5,193,276.80
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Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **Village Ridge, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**Case number (if known) **22-80863**☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Altdorfer, Dana N 235 Partridge Ave Marion, IA 52302 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown \$0.00
2.2	Priority creditor's name and mailing address Bailey, Chantal M 1740 Cherokee Dr Marion, IA 52302 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown \$0.00

Debtor	Village Ridge, LLC	Case number (if known)	22-80863
Name			
2.3	Priority creditor's name and mailing address Bell, Ashlee A 8050 Jandel Ct Toddville, IA 52341	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address Clabough, Marina S 1545 Hillview Dr Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address Cratton, Carrie J 640 Bentley Dr Unit 25 Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address Deemer, Chanda L 1155 11th St Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	22-80863
2.7	Priority creditor's name and mailing address Dennis, Tawa 127 Southview Dr Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.8	Priority creditor's name and mailing address Drey, Amanda K 518 3rd Ave SW Mount Vernon, IA 52314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.9	Priority creditor's name and mailing address Ealy, Amy L 2550 Hunter's Ridge Road Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.10	Priority creditor's name and mailing address Ellingson, Dale W 3957 Central City Rd Center Point, IA 52213	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
2.11	Priority creditor's name and mailing address Glandon, Kelsey M 4931 Tama St #4 Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.12	Priority creditor's name and mailing address Gott, Jody M 857 19th St SE Cedar Rapids, IA 52403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.13	Priority creditor's name and mailing address Hanson, Scott A 1738 Mt Vernon Rd SE Cedar Rapids, IA 52403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.14	Priority creditor's name and mailing address Harper, Patricia A 1055 Shae Dr Palo, IA 52324	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Village Ridge, LLC	Case number (if known)	22-80863
Name			
2.15	Priority creditor's name and mailing address Henry, Jennifer M 250 N Elm St Monticello, IA 52310	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.16	Priority creditor's name and mailing address Herman, Andrew J 272 10th Avenue Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.17	Priority creditor's name and mailing address Hilbert, Rebekah M 1150 Longview Drive Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.18	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred 2022		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
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2.19	Priority creditor's name and mailing address Iowa AG Hoover Building 1305 E Walnut Street Des Moines, IA 50319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Iowa DHHS 321 E. 12th Street Des Moines, IA 50319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.21	Priority creditor's name and mailing address Iowa DOR 1305 E Walnut Street Fourth Floor, 0107 Des Moines, IA 50319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.22	Priority creditor's name and mailing address Knight, Kimberly K 1503 Dare NE Cedar Rapids, IA 52402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Village Ridge, LLC	Case number (if known)	22-80863
Name			
2.23	Priority creditor's name and mailing address Leander, Joshua R 329 Neta Dr Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.24	Priority creditor's name and mailing address Lewis, Shantana S PO Box 481 Walford, IA 52351	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.25	Priority creditor's name and mailing address Marion County Treasurer 214 E Main Street, #2 Knoxville, IA 50138	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.26	Priority creditor's name and mailing address Martin, Jordan L 79 Main Ave Atkins, IA 52206	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
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2.27	Priority creditor's name and mailing address Martinez, Amy M 3045 4th Ave Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.28	Priority creditor's name and mailing address May, Hannah E 370 Crandall Dr NE Cedar Rapids, IA 52402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.29	Priority creditor's name and mailing address McClinton, Tatiana 5240 16th Ave SW Cedar Rapids, IA 52404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.30	Priority creditor's name and mailing address Morgan, Lolita A 1423 Wildwood Dr NE Cedar Rapids, IA 52402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
2.31	Priority creditor's name and mailing address Mukuna, Edward W 190 Ridge Drive #3 Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.32	Priority creditor's name and mailing address Mummelthie, Randi 806 36th St SE Cedar Rapids, IA 52403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.33	Priority creditor's name and mailing address Niemeier, Diana L 2246 Chandler St. SW Cedar Rapids, IA 52404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.34	Priority creditor's name and mailing address Pearson, Amber L 804 N Williams St Anamosa, IA 52205	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim: Trade Debt	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
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2.35	Priority creditor's name and mailing address Schminkey, Angela L 1833 B Ave NE Apt A Cedar Rapids, IA 52402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.36	Priority creditor's name and mailing address Shelton, Steven 2407 Franklin Ave Cedar Rapids, IA 52402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.37	Priority creditor's name and mailing address Shrope, Robin J 267 Lortz Dr Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.38	Priority creditor's name and mailing address Tapken, Angela M 903 E 2nd St #1 Anamosa, IA 52205	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
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2.39	Priority creditor's name and mailing address Thomas, Tammy L 1055 4th St Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.40	Priority creditor's name and mailing address Tippey, Sabrina 422 23rd St NW Cedar Rapids, IA 52405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.41	Priority creditor's name and mailing address Tipton, Joy E 266 Lortz Dr Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.42	Priority creditor's name and mailing address Tonn, Jessica L 2246 Chandler St SW Cedar Rapids, IA 52404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Village Ridge, LLC	Case number (if known)	22-80863
Name			
2.43	Priority creditor's name and mailing address Vincent, Theresa E 94 Simpson St SW Cedar Rapids, IA 52404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.44	Priority creditor's name and mailing address White-Mohseni, Laura 2130 24th St Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.45	Priority creditor's name and mailing address Wiens, Gary L 408 B Avenue NE Mount Vernon, IA 52314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.46	Priority creditor's name and mailing address Wiens, Susan L 408 B Avenue NE Mount Vernon, IA 52314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
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2.47	Priority creditor's name and mailing address Wright, Corey J 1877 Hunters Creek Way Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.48	Priority creditor's name and mailing address Yoders, Raven R 1160 Elm St Marion, IA 52302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
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3.1	Nonpriority creditor's name and mailing address A Place For Mom Po Box 913241 Denver, CO 80291	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,498.82
Date(s) debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.2	Nonpriority creditor's name and mailing address Alliant Energy PO Box 3060 Cedar Rapids, IA 52406-3060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$7,163.23
Date(s) debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.3	Nonpriority creditor's name and mailing address Allied Glass PO Box 1166 Cedar Rapids, IA 52406	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,319.00
Date(s) debt was incurred		Basis for the claim: Trade Debt	
Last 4 digits of account number		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	22-80863
3.4	Nonpriority creditor's name and mailing address ALTUS GTS TRUST 2400 Veterans Memorial Blvd, Suite 300 Kenner, LA 70062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,601.93
3.5	Nonpriority creditor's name and mailing address Batteries & Bulbs 266 Blairs Ferry Roadm NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$372.75
3.6	Nonpriority creditor's name and mailing address Blackhawk Automatic Sprinklers PO Box 998 Cedar Falls, IA 50613 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,184.90
3.7	Nonpriority creditor's name and mailing address Bling It On! 122 N McKenna Ave Gretna, NE 68028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,148.72
3.8	Nonpriority creditor's name and mailing address Ciscor 2570 W int'l Speedway Blvd Suite 200 Daytona Beach, FL 32114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,304.80
3.9	Nonpriority creditor's name and mailing address City of Marion 1225 6th Ave Suite 170 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10.00
3.10	Nonpriority creditor's name and mailing address CLIA Laboratory Program P.O. Box 530882 Atlanta, GA 30353-0882 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$360.00

Debtor	Name	Case number (if known)	22-80863
3.11	Nonpriority creditor's name and mailing address Colony Heating and Air Conditioning 2224 16th Ave SW Cedar Rapids, IA 52404 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133.75
3.12	Nonpriority creditor's name and mailing address Community Pharmacy PO Box 524 Gretna, NE 68028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,272.34
3.13	Nonpriority creditor's name and mailing address Direct Supply Equipment Box 88201 Milwaukee, WI 53288-0201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$864.92
3.14	Nonpriority creditor's name and mailing address Emerson Specialty Hardware & Locksmithin 415 3rd Ave SW Cedar Rapids, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,985.34
3.15	Nonpriority creditor's name and mailing address Empowered Connections 47 Julia Ann Dr NW Cedar Rapids, IA 52405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,400.00
3.16	Nonpriority creditor's name and mailing address Gazette Communications PO Box 1862 Cedar Rapids, IA 52406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,432.94
3.17	Nonpriority creditor's name and mailing address Goodwin Tucker PO Box 3285 Des Moines, IA 50316-0285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,403.50

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
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3.18	Nonpriority creditor's name and mailing address Greg's Lawn & Landscaping 1200 Continental Place NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$922.10
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3.19	Nonpriority creditor's name and mailing address Hitech / Price Industrial Electric 405 N Troy Rd Robins, IA 52328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112.35
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3.20	Nonpriority creditor's name and mailing address Iowa Division of Labor Services 150 Des Moines St Des Moines, IA 50309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$405.00
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3.21	Nonpriority creditor's name and mailing address Iowa Health Care Association 1775 90th St West Des Moines, IA 50266-1563 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,723.74
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3.22	Nonpriority creditor's name and mailing address Iowa Physicians Clinic Medical PO Box 1455 Des Moines, IA 50306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$144.00
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3.23	Nonpriority creditor's name and mailing address JDC Solutions PO Box 896 Gretna, NE 68028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
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3.24	Nonpriority creditor's name and mailing address Johnson Ctrls Fire Prot (SimplexGrinnell Dept. CH 10320 Palatine, IL 60055-0320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,215.21
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Debtor	Name	Case number (if known)	22-80863
3.25	Nonpriority creditor's name and mailing address JP Plumbing & Heating, Inc 895 7th Ave Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,567.25
3.26	Nonpriority creditor's name and mailing address Konica Minolta Premier Finance Po Box 51043 Los Angeles, CA 90051-5343 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,683.75
3.27	Nonpriority creditor's name and mailing address Lampe Appliance Service, Inc 210 29th Street NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$269.64
3.28	Nonpriority creditor's name and mailing address Leading Edge 4303 South 90th St. Omaha, NE 68127 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$201.57
3.29	Nonpriority creditor's name and mailing address linn Coop Car Care Center 375 35th St Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$178.35
3.30	Nonpriority creditor's name and mailing address Martin Bros. Distributing Co. Inc. c/o Gerry Church 406 Viking Road Cedar Falls, IA 50613-0010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58,787.68
3.31	Nonpriority creditor's name and mailing address Mediacom 6300 Council St. NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,442.14

Debtor Village Ridge, LLC		Case number (if known) 22-80863
Name		
3.32	Nonpriority creditor's name and mailing address Menards Comm Cap One Trade Capital One Trade Credit Po Box 60506 City of Industry, CA 91716-0506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,996.73 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address Michael E Wilcox 122 N McKenna Ave Gretna, NE 68028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address MidAmerican Energy PO Box 8020 Davenport, IA 52808-8020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,747.77 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address Motion Picture Licensing Corporation PO Box 80144 City of Industry, CA 91716-8144 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$133.92 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address Nationwide PO Box 10479 Des Moines, IA 50306-0479 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,264.57 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address NCMIC Finance Corp PO Box 9118 Des Moines, IA 50306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,599.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address Office Express 207 2nd Ave. SW Cedar Rapids, IA 52404 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$790.37 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)	22-80863
3.39	Nonpriority creditor's name and mailing address Otis Elevator P. O. Box 73579 Chicago, IL 60673-7579 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,747.00
3.40	Nonpriority creditor's name and mailing address PlumbMaster PO Box 117187 Atlanta, GA 30368-7187 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$272.59
3.41	Nonpriority creditor's name and mailing address Plunkett's 40 NE 52nd Way Fridley, MN 55421-1014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.76
3.42	Nonpriority creditor's name and mailing address Republic Services PO Box 9001154 Louisville, KY 40290-1154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$505.47
3.43	Nonpriority creditor's name and mailing address Residex / tenX Systems, LLC PO Box 368 Circle Pines, MN 55014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,746.00
3.44	Nonpriority creditor's name and mailing address Roto-Rooter 852 - 44th Street S.E. Cedar Rapids, IA 52403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,364.70
3.45	Nonpriority creditor's name and mailing address Save our Sink 8601 Blair Ferry Rd Cedar Rapids, IA 52411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$269.42

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
3.46	Nonpriority creditor's name and mailing address Sherwin-Williams Co. 140 Collins Rd NE Cedar Rapids, IA 52402-3229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,553.04
3.47	Nonpriority creditor's name and mailing address St Luke's Work Well Solutions 830-1st Ave NE PO Box 3026 Cedar Rapids, IA 52406-3026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$649.00
3.48	Nonpriority creditor's name and mailing address Staples Po Box 105638 Atlanta, GA 30348-5638 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,768.67
3.49	Nonpriority creditor's name and mailing address Star Food Equipment 6201 S Gateway Dr Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.56
3.50	Nonpriority creditor's name and mailing address Stericycle PO Box 6575 Carol Stream, IL 60197-6575 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,215.20
3.51	Nonpriority creditor's name and mailing address Streff Electric, Inc 751 Center Point Road NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$520.00
3.52	Nonpriority creditor's name and mailing address T D Builders 3129 Deerfield Dr. NE Swisher, IA 52338 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$788.00

Debtor	Name	Case number (if known)	22-80863
3.53	Nonpriority creditor's name and mailing address Village Ridge Resident 1 3122 Tama St SE Cedar Rapids, IA 52403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.54	Nonpriority creditor's name and mailing address Village Ridge Resident 10 1327 Petrus Dr Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.55	Nonpriority creditor's name and mailing address Village Ridge Resident 11 365 Marion Blvd #224 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.56	Nonpriority creditor's name and mailing address Village Ridge Resident 12 1017 Orrian Dr SE Cedar Rapids, IA 52403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.57	Nonpriority creditor's name and mailing address Village Ridge Resident 13 202 20th St NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.58	Nonpriority creditor's name and mailing address Village Ridge Resident 14 365 Marion Blvd #201 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.59	Nonpriority creditor's name and mailing address Village Ridge Resident 15 1190 4th St Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.60	Nonpriority creditor's name and mailing address Village Ridge Resident 16 2290 Rosewood Ridge Court Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.61	Nonpriority creditor's name and mailing address Village Ridge Resident 17 777 Grove St Central City, IA 52214 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.62	Nonpriority creditor's name and mailing address Village Ridge Resident 18 418 6th Ave Ste 1101 Des Moines, IA 50309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.63	Nonpriority creditor's name and mailing address Village Ridge Resident 19 525 Knollwood Dr SE Cedar Rapids, IA 52403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.64	Nonpriority creditor's name and mailing address Village Ridge Resident 2 P.O. Box 233 Walker, IA 52352 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.65	Nonpriority creditor's name and mailing address Village Ridge Resident 20 514 Green Valley Ter. SE Cedar Rapids, IA 52403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.66	Nonpriority creditor's name and mailing address Village Ridge Resident 21 1975 Brown Deer Tr. Coralville, IA 52241 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.67	Nonpriority creditor's name and mailing address Village Ridge Resident 22 345 Marion Blvd #101 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.68	Nonpriority creditor's name and mailing address Village Ridge Resident 23 570 Phantom Woods Rd #4 Mukwonago, WI 53149 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.69	Nonpriority creditor's name and mailing address Village Ridge Resident 24 305 Larick Dr Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.70	Nonpriority creditor's name and mailing address Village Ridge Resident 25 140 N Mentzer Rd Robinms, IA 52328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.71	Nonpriority creditor's name and mailing address Village Ridge Resident 26 PO Box 5787 Coralville, IA 52241 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.72	Nonpriority creditor's name and mailing address Village Ridge Resident 27 2590 Hillview Dr Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.73	Nonpriority creditor's name and mailing address Village Ridge Resident 28 1412 Goldfinch Ct NE Swisher, IA 52338 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.74	Nonpriority creditor's name and mailing address Village Ridge Resident 29 365 Marion Blvd #111 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.75	Nonpriority creditor's name and mailing address Village Ridge Resident 3 3490 Willowridge Rd Unit D Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.76	Nonpriority creditor's name and mailing address Village Ridge Resident 30 PO Box 134 Blairstown, IA 52209 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.77	Nonpriority creditor's name and mailing address Village Ridge Resident 31 3550 Stone Creek Circle SW Unit 201 Cedar Rapids, IA 52404 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.78	Nonpriority creditor's name and mailing address Village Ridge Resident 32 365 Marion Blvd MC#17 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.79	Nonpriority creditor's name and mailing address Village Ridge Resident 33 2108 Larry Drive NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.80	Nonpriority creditor's name and mailing address Village Ridge Resident 34 6842 Spear Point Ct Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.81	Nonpriority creditor's name and mailing address Village Ridge Resident 35 365 Marion Blvd #209 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.82	Nonpriority creditor's name and mailing address Village Ridge Resident 36 707 43rd St NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.83	Nonpriority creditor's name and mailing address Village Ridge Resident 37 728 Raleigh Ln Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.84	Nonpriority creditor's name and mailing address Village Ridge Resident 38 2585 Lansing Drive Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.85	Nonpriority creditor's name and mailing address Village Ridge Resident 39 365 Marion Blvd #110 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.86	Nonpriority creditor's name and mailing address Village Ridge Resident 4 345 Marion Blvd #104 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.87	Nonpriority creditor's name and mailing address Village Ridge Resident 40 c/o Scott Owen 2300E Ave NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.88	Nonpriority creditor's name and mailing address Village Ridge Resident 41 365 Marion Blvd #103 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.89	Nonpriority creditor's name and mailing address Village Ridge Resident 42 5724 Hwy 1 Martelle, IA 52305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.90	Nonpriority creditor's name and mailing address Village Ridge Resident 43 7721 Burr Ridge Dr NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.91	Nonpriority creditor's name and mailing address Village Ridge Resident 44 3245 English Cove Lane Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.92	Nonpriority creditor's name and mailing address Village Ridge Resident 45 Attn:Todd Larson Moline, IL 61265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.93	Nonpriority creditor's name and mailing address Village Ridge Resident 46 680 Oak Park Circle Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.94	Nonpriority creditor's name and mailing address Village Ridge Resident 47 365 Marion Blvd #202 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Village Ridge, LLC Name	Case number (if known)	22-80863
3.95	Nonpriority creditor's name and mailing address Village Ridge Resident 48 1240 McGowan Blvd Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.96	Nonpriority creditor's name and mailing address Village Ridge Resident 49 2882 Stone Rd Springville, IA 52336 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.97	Nonpriority creditor's name and mailing address Village Ridge Resident 5 708 4th Ave Coggon, IA 52218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.98	Nonpriority creditor's name and mailing address Village Ridge Resident 50 5302 Bent Tree Ct NE Cedar Rapids, IA 52411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.99	Nonpriority creditor's name and mailing address Village Ridge Resident 51 317 E Terrace Dr Center Point, IA 52213 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.100	Nonpriority creditor's name and mailing address Village Ridge Resident 52 365 Marion Blvd. #203 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.101	Nonpriority creditor's name and mailing address Village Ridge Resident 53 365 Marion Blvd #215 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.102	Nonpriority creditor's name and mailing address Village Ridge Resident 54 701 Rose Ave Des Moines, IA 50315 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.103	Nonpriority creditor's name and mailing address Village Ridge Resident 55 267 Lortz Dr Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.104	Nonpriority creditor's name and mailing address Village Ridge Resident 56 4390 Flagstick Dr Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.105	Nonpriority creditor's name and mailing address Village Ridge Resident 57 365 Marion Blvd #206 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.106	Nonpriority creditor's name and mailing address Village Ridge Resident 58 65 Bunker Hill Dr Lisbon, IA 52253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.107	Nonpriority creditor's name and mailing address Village Ridge Resident 59 1345 Starry Dr Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.108	Nonpriority creditor's name and mailing address Village Ridge Resident 6 555 Penn Ridge Pl North Liberty, IA 52317 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)	22-80863
3.109	Nonpriority creditor's name and mailing address Village Ridge Resident 60 365 Marion Blvd #213 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.110	Nonpriority creditor's name and mailing address Village Ridge Resident 61 1226 34th St NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.111	Nonpriority creditor's name and mailing address Village Ridge Resident 62 3125 Shasta Ct. NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.112	Nonpriority creditor's name and mailing address Village Ridge Resident 63 1240 E Ave Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.113	Nonpriority creditor's name and mailing address Village Ridge Resident 7 3025 Hollenbeck Rd Palo, IA 52324 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.114	Nonpriority creditor's name and mailing address Village Ridge Resident 8 6445 S. Maple Avenue #1036 Tempe, AZ 85283 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.115	Nonpriority creditor's name and mailing address Village Ridge Resident 9 365 Marion Blvd #108 Marion, IA 52302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor **Village Ridge, LLC**
NameCase number (if known) **22-80863**

3.116 Nonpriority creditor's name and mailing address

WB Leasing, LLC
122 N McKenna Ave
Gretna, NE 68028

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Trade Debt**Is the claim subject to offset? ☒ No ☐ Yes**\$6,800.00**

3.117 Nonpriority creditor's name and mailing address

Wells Fargo Vendor Financial Services, L
Po Box 030310
Los Angeles, CA 90030

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Trade Debt**Is the claim subject to offset? ☒ No ☐ Yes**\$8,409.73**

3.118 Nonpriority creditor's name and mailing address

West Bend Mutual Ins Co
Bin 432
Milwaukee, WI 53288-0432

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Trade Debt**Is the claim subject to offset? ☒ No ☐ Yes**\$3,478.40**

3.119 Nonpriority creditor's name and mailing address

Wilcox Professional Services
122 N McKenna Ave
Gretna, NE 68028

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Trade Debt**Is the claim subject to offset? ☒ No ☐ Yes**\$17,680.00**

3.120 Nonpriority creditor's name and mailing address

Xtream
Po Box 5744
Carol Stream, IL 60197

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Trade Debt**Is the claim subject to offset? ☒ No ☐ Yes**\$141.09****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the
related creditor (if any) listed?Last 4 digits of
account number, if
any**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts

5a. \$ **0.00**5b. + \$ **260,431.81**5c. \$ **260,431.81**

Fill in this information to identify the case:

Debtor name **Village Ridge, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**Case number (if known) **22-80863**☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal*

Property

(Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Management Agreement**

State the term remaining

List the contract number of any government contract

Dimensions in Senior Living LLC
122 N McKenna Ave
Fort Calhoun, NE 680232.2. State what the contract or lease is for and the nature of the debtor's interest **Copier Machine Lease and Maintance Agreement**

State the term remaining

List the contract number of any government contract

Konica Minolta Business Solutions2.3. State what the contract or lease is for and the nature of the debtor's interest **Biohazardous Waste Disposal**

State the term remaining

List the contract number of any government contract

Stericycle
PO Box 6575
Carol Stream, IL 60197-65752.4. State what the contract or lease is for and the nature of the debtor's interest **2014 Ford E 450 14 passenger bus with 2 wheel chairs**

State the term remaining

List the contract number of any government contract

WB Leasing LLC

Debtor 1 **Village Ridge, LLC**

First Name

Middle Name

Last Name

Case number (if known) **22-80863****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

- 2.5. State what the contract or lease is for and the nature of the debtor's interest **2018 Ford Taurus SEL AWD 4 DR**

State the term remaining

List the contract number of any government contract

WB Leasing LLC

Fill in this information to identify the case:

Debtor name **Village Ridge, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**Case number (if known) **22-80863**☐ Check if this is an amended filingOfficial Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules
that apply:2.1 Amy
Wilcox-Burns

Fannie Mae

☒ D 2.2
☐ E/F _____
☐ G _____

2.2 Jean Wilcox

Fannie Mae

☒ D 2.2
☐ E/F _____
☐ G _____2.3 Michael E.
Wilcox

Fannie Mae

☒ D 2.2
☐ E/F _____
☐ G _____

2.4 Ryan Burns

Fannie Mae

☒ D 2.2
☐ E/F _____
☐ G _____

Fill in this information to identify the case:

Debtor name Village Ridge, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 22-80863

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2022 to Filing Date

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$2,752,457.40

For prior year:
From 1/01/2021 to 12/31/2021

☒ Operating a business
☐ Other _____

\$2,710,327.00

For year before that:
From 1/01/2020 to 12/31/2020

☒ Operating a business
☐ Other _____

\$3,023,123.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Village Ridge, LLC**Case number (if known) **22-80863**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Attached		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other The attachment may include payments made in the ordinary course of business

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See Attached		\$0.00	the attached may include payments made in the ordinary course of business and outside the time frame

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Champion Contractor and Services Commercial LLC v. Dimensions, Valley Ridge LLC, et al. LACV009015	Breach of Contract and Collections.	Linn County District Court Cedar Rapids, IA 52401	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Village Ridge, LLC**Case number (if known) **22-80863**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.2.	Johnson Controls Fire Protection v. Village Ridge of Marion	collections	Iowa District Court Linn County Iowa	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Susan Pierce v. Villag Ridge LLC CP-02-22-77913/26A-2022-00375	Employment/Wages	Iowa Civil Rights Commission State Building 400 E 14th St Des Moines, IA 50319	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	Champion Contractor and Services Commerial LLC v. Dimensions, Valley Ridge LLC, et al. CI 22-1249	Collections.	Sarpy County District Court Papillion, NE 68046	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None
Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
Damages to Facility on 4/7/2020 and 8/10/2020 (This is outside the time frame, but payments were ongoing as well as issues with the contractor's lawsuit)	This is still being determined.	4/7/2020 and 8/10/2020	Unknown

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Village Ridge, LLC**Case number (if known) **22-80863**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Turner Legal Group		11/7/2022	\$0.00
	Email or website address			
	Who made the payment, if not debtor? Village Place LLC			
11.2.	Erickson & Sederstrom 10330 Regency Parkway Dr., #100 Omaha, NE 68114		11-7-2022	\$0.00
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

Debtor **Village Ridge, LLC**Case number (if known) **22-80863**

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Does debtor still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address

Names of anyone with access to it

Description of the contents

Does debtor still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Debtor **Village Ridge, LLC**Case number (if known) **22-80863****Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
-----------------------	-------------------------------------	--

26. Books, records, and financial statements**26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.**

- ☐ None

Name and address	Date of service From-To to present
26a.1. Michael E Wilcox CPS 122 N McKenna Ave Gretna, NE 68028	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

Debtor **Village Ridge, LLC**Case number (if known) **22-80863**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address**If any books of account and records are unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory**Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Jean Wilcox	122 N McKenna Ave Gretna, NE 68023	Managing Member	
Name	Address	Position and nature of any interest	% of interest, if any
Amy Wilcox-Burns	122 N McKenna Ave Gretna, NE 68023	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Ryan Burns	122 N McKenna Ave Fort Calhoun, NE 68023	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Michael E Wilcox	122 N McKenna Ave Gretna, NE 68028	Member	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

Debtor Village Ridge, LLCCase number (if known) 22-80863

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 4, 2023/s/ Amy Wilcox-Burns

Signature of individual signing on behalf of the debtor

Amy Wilcox-Burns

Printed name

Position or relationship to debtor Chief Restructuring OfficerAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

Village Ridge

12/27/2022 4:33 PM

Register: 1003 · Operating-Farmers St. Bank

From 08/24/2022 through 11/22/2022

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
08/24/2022		Farmers St. Bank	ADMINISTRATIVE EXPENS...	overdraft	29.00	X		72,681.88
08/24/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer	380.00	X		72,301.88
08/25/2022		Misc	INCOME:6995 · Miscellaneous...	deposit transfer		X	2,050.00	74,351.88
08/25/2022		Farmers St. Bank	ADMINISTRATIVE EXPENS...	overdrafts	58.00	X		74,293.88
08/25/2022			1005 · Payroll-Farmers State B...	Funds Transfer	1,200.00	X		73,093.88
08/26/2022	dm	Mediacom	2000 · Accounts Payable		2,829.52	X		70,264.36
08/26/2022	dm	Mediacom	2000 · Accounts Payable		471.43	X		69,792.93
08/26/2022	9687	Assurity Life Insurance Com...	-split-	Group ID 1000000173	147.29	X		69,645.64
08/26/2022	9688	Unum (Life and AD&D)	2000 · Accounts Payable		104.03	X		69,541.61
08/26/2022	9689	Unum (LTC)	2000 · Accounts Payable		335.40	X		69,206.21
08/26/2022	9690	Unum (STD)	2100 · Payroll Liabilities	Policy # 0617839-001	471.39	X		68,734.82
08/29/2022			-split-	Deposit		X	5,739.00	74,473.82
08/29/2022			-split-	Deposit			4,800.00	79,273.82
08/29/2022		Farmers St. Bank	ADMINISTRATIVE EXPENS...	overdrafts	58.00	X		79,215.82
08/29/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer	1,000.00	X		78,215.82
08/30/2022		Leviton Law	ADMINISTRATIVE EXPENS...		1,200.00	X		77,015.82
08/30/2022	dm	Martin Bros. Distributing Co...	2000 · Accounts Payable		606.20	X		76,409.62
08/30/2022	dm	Martin Bros. Distributing Co...	2000 · Accounts Payable		251.48	X		76,158.14
08/30/2022	dm	Martin Bros. Distributing Co...	2000 · Accounts Payable		7,397.10	X		68,761.04
08/30/2022	9691	Olson, Larry	4280 · Room Security Deposits		875.00			67,886.04
08/30/2022	9692	Owen, Muriel	1200 · Accounts Receivable		900.00			66,986.04
08/31/2022			-split-	Deposit		X	26,450.22	93,436.26
08/31/2022		Farmers St. Bank	ADMINISTRATIVE EXPENS...	overdraft	29.00	X		93,407.26
08/31/2022			ADMINISTRATIVE EXPENS...	Service Charge	22.74	X		93,384.52
08/31/2022	DM	United Health Care	-split-		7,402.69	X		85,981.83
08/31/2022	DM	Principal Financial Group	2100 · Payroll Liabilities		375.66	X		85,606.17
09/01/2022			-split-	Deposit		X	12,600.00	98,206.17
09/01/2022	9693	Ciscor	2000 · Accounts Payable		663.20	X		97,542.97

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Register: 1003 · Operating-Farmers St. Bank

From 08/24/2022 through 11/22/2022

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
09/02/2022			-split-	Deposit		X	23,291.00	120,833.97
09/02/2022	dm	Republic Services	2000 · Accounts Payable		4,043.90	X		116,790.07
09/05/2022	9694	Dimensions in Senior Living	4140 · Accrued Management F...		6,000.00	X		110,790.07
09/06/2022			-split-	Deposit		X	140,526.53	251,316.60
09/06/2022			-split-	Deposit		X	15,565.00	266,881.60
09/06/2022			1005 · Payroll-Farmers State B...	Funds Transfer 9-7-2...	75,000.00	X		191,881.60
09/06/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer	125.00	X		191,756.60
09/06/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer - acti...	372.34	X		191,384.26
09/09/2022	dm	MidAmerican Energy	2000 · Accounts Payable		364.42	X		191,019.84
09/09/2022	dm	MidAmerican Energy	2000 · Accounts Payable		228.17	X		190,791.67
09/09/2022	DM	Berkadia Commercial Mortg...	2000 · Accounts Payable	Loan 338220761	43,853.19	X		146,938.48
09/11/2022	9695	City of Marion	2000 · Accounts Payable	Landlord Registration	100.00	X		146,838.48
09/13/2022	dm	TimeIPS	2000 · Accounts Payable		248.75	X		146,589.73
09/14/2022	dm	Republic Services	2000 · Accounts Payable		4,042.03	X		142,547.70
09/14/2022	dm	Alliant Energy	2000 · Accounts Payable		8,674.23	X		133,873.47
09/15/2022			1005 · Payroll-Farmers State B...	Funds Transfer	16,000.00	X		117,873.47
09/19/2022			-split-	Deposit		X	12,680.00	130,553.47
09/19/2022	dm	Marion Municipal Water De...	2000 · Accounts Payable		2,783.60	X		127,769.87
09/20/2022	DM	Nationwide	2000 · Accounts Payable		482.00	X		127,287.87
09/21/2022	dm	Greg's Lawn & Landscaping	2000 · Accounts Payable		926.62	X		126,361.25
09/21/2022	9696	Adam Jungjohann	2000 · Accounts Payable	August 2022	745.85	X		125,615.40
09/21/2022	9697	JDC Solutions	2000 · Accounts Payable		200.00	X		125,415.40
09/21/2022			1005 · Payroll-Farmers State B...	Funds Transfer 9-2-2...	48,000.00	X		77,415.40
09/23/2022	DM	Unum (STD)	2100 · Payroll Liabilities	Policy # 0617839-001	744.52	X		76,670.88
09/26/2022			-split-	Deposit		X	9,979.08	86,649.96
09/26/2022			-split-	Deposit		X	4,675.12	91,325.08
09/26/2022	dm	Mediacom	2000 · Accounts Payable		471.43	X		90,853.65
09/26/2022	dm	Mediacom	2000 · Accounts Payable		2,829.52	X		88,024.13

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Register: 1003 - Operating-Farmers St. Bank

From 08/24/2022 through 11/22/2022

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
09/28/2022			1005 · Payroll-Farmers State B...	Funds Transfer	14,700.00	X		73,324.13
09/30/2022			-split-	Deposit		X	24,804.44	98,128.57
09/30/2022		Leviton Law	ADMINISTRATIVE EXPENS...		1,200.00	X		96,928.57
09/30/2022			ADMINISTRATIVE EXPENS...	Service Charge	27.55	X		96,901.02
09/30/2022	dm	Martin Bros. Distributing Co...	2000 · Accounts Payable		11,905.65	X		84,995.37
09/30/2022	dm	Martin Bros. Distributing Co...	2000 · Accounts Payable		2,248.49	X		82,746.88
09/30/2022	dm	Martin Bros. Distributing Co...	2000 · Accounts Payable		1,652.19	X		81,094.69
09/30/2022	DM	Principal Financial Group	2100 · Payroll Liabilities		259.30	X		80,835.39
09/30/2022	DM	United Health Care	-split-		7,161.84	X		73,673.55
09/30/2022			4000 · Reconciliation Discrepa...	Balance Adjustment		X	0.01	73,673.56
09/30/2022			3900 · Retained Earnings	to correct outstandin...		X	110,177.43	183,850.99
09/30/2022			3900 · Retained Earnings	to correct credits on ...	185,491.63	X		-1,640.64
10/03/2022			-split-	Deposit		X	23,939.50	22,298.86
10/05/2022			-split-	Deposit		X	146,680.00	168,978.86
10/05/2022	9698	Dimensions in Senior Living	4140 · Accrued Management F...		6,000.00	X		162,978.86
10/06/2022			-split-	Deposit		X	26,964.75	189,943.61
10/06/2022			1005 · Payroll-Farmers State B...	Funds Transfer 10-7-...	65,000.00	X		124,943.61
10/11/2022	DM	Berkadia Commercial Mortg...	2000 · Accounts Payable		43,853.19	X		81,090.42
10/12/2022	dm	TimelPS	2000 · Accounts Payable		252.73	X		80,837.69
10/12/2022	DM	MidAmerican Energy	2000 · Accounts Payable		260.38	X		80,577.31
10/12/2022	DM	MidAmerican Energy	2000 · Accounts Payable		443.80	X		80,133.51
10/13/2022	DM	Alliant Energy	2000 · Accounts Payable		7,916.59	X		72,216.92
10/17/2022	dm	Marion Municipal Water De...	2000 · Accounts Payable		2,398.78	X		69,818.14
10/17/2022	DM	Nationwide	2000 · Accounts Payable		4,746.33	X		65,071.81
10/17/2022	DM	West Bend Mutual Ins Co	2000 · Accounts Payable		4,333.00	X		60,738.81
10/17/2022	9700	Modern Piping Service Divis...	2000 · Accounts Payable		31,703.09	X		29,035.72
10/18/2022			-split-	Deposit		X	16,735.00	45,770.72
10/18/2022	9699	US Postmaster	ADMINISTRATIVE EXPENS...		137.05	X		45,633.67

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Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/20/2022	DM	Greg's Lawn & Landscaping	2000 · Accounts Payable		917.57	X		44,716.10
10/21/2022			1005 · Payroll-Farmers State B...	Funds Transfer 10-21...	65,000.00	X		-20,283.90
10/24/2022	9701	JDC Solutions	2000 · Accounts Payable		200.00	X		-20,483.90
10/24/2022	9702	Adam Jungjohann	2000 · Accounts Payable	September 2022	745.85	X		-21,229.75
10/26/2022		Farmers St. Bank	ADMINISTRATIVE EXPENS...		29.00	X		-21,258.75
10/26/2022	DM	Legal Shield	2100 · Payroll Liabilities		98.70	X		-21,357.45
10/26/2022	DM	Mediacom	2000 · Accounts Payable		469.44	X		-21,826.89
10/26/2022	DM	Mediacom	2000 · Accounts Payable		2,829.52	X		-24,656.41
10/26/2022	DM	Republic Services	2000 · Accounts Payable		6,989.32	X		-31,645.73
10/26/2022			3900 · Retained Earnings	Funds Transfer		X	19,000.00	-12,645.73
10/27/2022			1499 · Undeposited Funds	Deposit		X	4,350.00	-8,295.73
10/27/2022			-split-	Deposit		X	11,973.00	3,677.27
10/27/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer - Oct ...	187.00	X		3,490.27
10/31/2022			-split-	Deposit		X	13,020.00	16,510.27
10/31/2022		Konica Minolta Premier Fina...	2000 · Accounts Payable	QuickBooks generate...		X		16,510.27
10/31/2022			ADMINISTRATIVE EXPENS...	Service Charge	24.77	X		16,485.50
10/31/2022	DM	Unum (Life and AD&D)	2000 · Accounts Payable		132.92	X		16,352.58
10/31/2022	DM	Principal Financial Group	2100 · Payroll Liabilities		433.84	X		15,918.74
10/31/2022	DM	United Health Care	-split-		10,199.50	X		5,719.24
10/31/2022	DM	Farmers St. Bank	ADMINISTRATIVE EXPENS...	stop payment	29.00	X		5,690.24
11/01/2022		Leviton Law	ADMINISTRATIVE EXPENS...		1,200.00	X		4,490.24
11/02/2022	9703	Quality First Insurance, LLC	2000 · Accounts Payable		5,544.06	X		-1,053.82
11/03/2022			-split-	Deposit		X	20,328.64	19,274.82
11/04/2022			-split-	Deposit		X	25,524.78	44,799.60
11/04/2022			1005 · Payroll-Farmers State B...	Funds Transfer 11-7-...	52,000.00	X		-7,200.40
11/05/2022	9709	Dimensions in Senior Living	4140 · Accrued Management F...		6,000.00	X		-13,200.40
11/07/2022			-split-	Deposit		X	155,748.50	142,548.10
11/09/2022		Martin Bros. Distributing Co...	2000 · Accounts Payable	QuickBooks generate...		X		142,548.10

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Register: 1003 · Operating-Farmers St. Bank

From 08/24/2022 through 11/22/2022

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
11/09/2022	dm	MidAmerican Energy	2000 · Accounts Payable		921.04	X		141,627.06
11/10/2022			-split-	Deposit		X	24,105.00	165,732.06
11/10/2022			-split-	Deposit		X	4,873.26	170,605.32
11/10/2022	9704	Amy Wilcox-Burns	2000 · Accounts Payable		185.37	X		170,419.95
11/10/2022	9705	Empowered Connections	2000 · Accounts Payable		800.00	X		169,619.95
11/10/2022	9706	Blackhawk Automatic Sprink...	2000 · Accounts Payable		653.48	X		168,966.47
11/10/2022			1005 · Payroll-Farmers State B...	Funds Transfer 11-7-...	15,000.00	X		153,966.47
11/10/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer	401.25	X		153,565.22
11/11/2022			1007 · Petty Cash-Farmers St. ...	Funds Transfer-Nov ...	556.00	X		153,009.22
11/14/2022	dm	Alliant Energy	2000 · Accounts Payable		5,229.80	X		147,779.42
11/14/2022	dm	TimelPS	2000 · Accounts Payable		270.64	X		147,508.78
11/14/2022	dm	MidAmerican Energy	2000 · Accounts Payable		1,045.84	X		146,462.94
11/14/2022	DM	Greg's Lawn & Landscaping	2000 · Accounts Payable		922.10	X		145,540.84
11/15/2022		Martin Bros. Distributing Co...	2000 · Accounts Payable	QuickBooks generatc...				145,540.84
11/15/2022	9707	Dimensions in Senior Living	-split-	Group ID 1000000173	393.99	X		145,146.85
11/17/2022	9708	Dimensions in Senior Living	-split-	Group ID 1000000173	463.23	X		144,683.62
11/17/2022			1005 · Payroll-Farmers State B...	Funds Transfer	6,000.00	X		138,683.62
11/21/2022	dm	Marion Municipal Water De...	2000 · Accounts Payable		2,702.92	X		135,980.70
11/21/2022			1005 · Payroll-Farmers State B...	Funds Transfer 11-22...	63,262.94	X		72,717.76
11/22/2022	9710	US Postmaster	ADMINISTRATIVE EXPENS...		120.00	X		72,597.76

Adam Jungjohann

Type	Date	Num	Account	Amount	Balance
					0.00
Bill	11/01/2020		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	11/29/2020	9277	2000 Accounts Payable	-745.85	0.00
Bill	12/01/2020		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	12/29/2020	9317	2000 Accounts Payable	-745.85	0.00
Bill	01/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	01/29/2021	9343	2000 Accounts Payable	-745.85	0.00
Bill	02/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	02/28/2021	9365	2000 Accounts Payable	-745.85	0.00
Bill	03/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	03/29/2021	9374	2000 Accounts Payable	-745.85	0.00
Bill	04/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	04/30/2021	9398	2000 Accounts Payable	-745.85	0.00
Bill	05/01/2021		2000 Accounts Payable	745.85	745.85
Bill	06/01/2021		2000 Accounts Payable	745.85	1,491.70
Bill Pmt -Check	06/10/2021	9445	2000 Accounts Payable	-745.85	745.85
Bill Pmt -Check	06/29/2021	9475	2000 Accounts Payable	-745.85	0.00
Bill	07/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	07/29/2021	9496	2000 Accounts Payable	-745.85	0.00
Bill	08/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	08/31/2021	9514	2000 Accounts Payable	-745.85	0.00
Bill	09/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	09/29/2021	9529	2000 Accounts Payable	-745.85	0.00
Bill	10/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	10/29/2021	9554	2000 Accounts Payable	-745.85	0.00
Bill	11/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	11/29/2021	9577	2000 Accounts Payable	-745.85	0.00
Bill	12/01/2021		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	12/29/2021	9596	2000 Accounts Payable	-745.85	0.00
Bill	01/29/2022		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	01/31/2022	9602	2000 Accounts Payable	-745.85	0.00
Bill	02/21/2022		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	02/28/2022	9626	2000 Accounts Payable	-745.85	0.00
Bill	03/01/2022		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	03/31/2022	9642	2000 Accounts Payable	-745.85	0.00
Bill	04/01/2022		2000 Accounts Payable	745.85	745.85
Bill Pmt -Check	04/29/2022	9661	2000 Accounts Payable	-745.85	0.00
Bill	05/01/2022		2000 Accounts Payable	745.85	745.85
Bill	06/01/2022		2000 Accounts Payable	745.85	1,491.70
Bill Pmt -Check	06/09/2022	9674	2000 Accounts Payable	-745.85	745.85
Bill	07/01/2022		2000 Accounts Payable	745.85	1,491.70
Bill Pmt -Check	07/18/2022	9680	2000 Accounts Payable	-745.85	745.85
Bill	08/01/2022		2000 Accounts Payable	745.85	1,491.70
Bill Pmt -Check	08/16/2022	9685	2000 Accounts Payable	-745.85	745.85
Bill	09/01/2022		2000 Accounts Payable	745.85	1,491.70
Bill Pmt -Check	09/21/2022	9696	2000 Accounts Payable	-745.85	745.85
Bill Pmt -Check	10/24/2022	9702	2000 Accounts Payable	-745.85	0.00

Attachment to Statement of Financial
Affairs Item 4

	Type	Date	Num	Account	Amount	Balance
Total Adam Jungohann					0.00	0.00
Amy Wilcox-Burns						0.00
	Bill	08/31/2022		2000 Accounts Payable	61.79	61.79
	Bill	09/30/2022		2000 Accounts Payable	61.79	123.58
	Bill	10/31/2022		2000 Accounts Payable	61.79	185.37
	Bill Pmt -Check	11/10/2022	9704	2000 Accounts Payable	-185.37	0.00
	Bill	11/23/2022		2000 Accounts Payable	87.00	87.00
Total Amy Wilcox-Burns					87.00	87.00
Bling It On!						1,237.00
	Bill	11/08/2020	876063	2000 Accounts Payable	294.03	1,531.03
	Bill	12/11/2020	876066	2000 Accounts Payable	359.41	1,890.44
	General Journal	12/31/2021		2000 Accounts Payable	-1,890.44	0.00
Total Bling It On!					-1,237.00	0.00
Dimensions in Senior Living						19,251.62
	Bill	11/01/2020		2000 Accounts Payable	10,974.23	30,225.85
	Bill	11/23/2020		2000 Accounts Payable	87.00	30,312.85
	Bill Pmt -Check	11/30/2020	9279	2000 Accounts Payable	-10,974.23	19,338.62
	Bill	11/30/2020		2000 Accounts Payable	516.06	19,854.68
	Bill	12/01/2020		2000 Accounts Payable	9,809.03	29,663.71
	Bill Pmt -Check	12/31/2020	9327	2000 Accounts Payable	-9,809.03	19,854.68
	Bill	12/31/2020		2000 Accounts Payable	621.57	20,476.25
	Bill	01/01/2021		2000 Accounts Payable	9,523.47	29,999.72
	Bill Pmt -Check	01/14/2021	9333	2000 Accounts Payable	-87.00	29,912.72
	Bill	01/24/2021		2000 Accounts Payable	597.06	30,509.78
	Bill Pmt -Check	01/31/2021	9350	2000 Accounts Payable	-9,523.47	20,986.31
	Bill	01/31/2021		2000 Accounts Payable	360.17	21,346.48
	Bill	02/01/2021		2000 Accounts Payable	9,362.72	30,709.20
	Bill	02/09/2021		2000 Accounts Payable	144.60	30,853.80
	Bill Pmt -Check	02/18/2021	9352	2000 Accounts Payable	-144.60	30,709.20
	Bill Pmt -Check	02/28/2021	9364	2000 Accounts Payable	-9,362.72	21,346.48
	Bill	02/28/2021		2000 Accounts Payable	542.07	21,888.55
	Bill	03/01/2021		2000 Accounts Payable	9,502.41	31,390.96
	Bill	03/17/2021		2000 Accounts Payable	200.00	31,590.96
	Bill Pmt -Check	03/22/2021	9373	2000 Accounts Payable	0.00	31,590.96
	Bill	03/31/2021		2000 Accounts Payable	45.00	31,635.96
	Bill	03/31/2021		2000 Accounts Payable	450.00	32,085.96
	Bill	03/31/2021		2000 Accounts Payable	9,970.13	42,056.09
	Bill Pmt -Check	04/14/2021	9390	2000 Accounts Payable	-9,502.41	32,553.68
	Bill	04/30/2021		2000 Accounts Payable	400.00	32,953.68
	Bill	05/01/2021		2000 Accounts Payable	9,916.42	42,870.10
	Bill Pmt -Check	05/10/2021	9415	2000 Accounts Payable	-9,970.13	32,899.97
	Bill	05/10/2021		2000 Accounts Payable	200.00	33,099.97
	Bill Pmt -Check	05/10/2021	9414	2000 Accounts Payable	0.00	33,099.97
	Bill Pmt -Check	05/10/2021	9416	2000 Accounts Payable	-13,337.61	19,762.36
	Bill	05/31/2021		2000 Accounts Payable	1,175.90	20,938.26
	Bill	06/01/2021		2000 Accounts Payable	10,090.41	31,028.67
	Bill	06/21/2021		2000 Accounts Payable	23.90	31,052.57

Type	Date	Num	Account	Amount	Balance
Bill Pmt -Check	08/21/2021	9457	2000 Accounts Payable	0.00	31,052.57
Bill Pmt -Check	08/30/2021	9480	2000 Accounts Payable	-9,916.42	21,136.15
Bill	08/30/2021		2000 Accounts Payable	300.00	21,436.15
Bill	07/31/2021		2000 Accounts Payable	411.52	21,847.67
Bill	08/01/2021		2000 Accounts Payable	8,183.96	30,031.63
Bill	08/31/2021		2000 Accounts Payable	1,091.18	31,122.81
Bill	09/01/2021		2000 Accounts Payable	7,517.12	38,639.93
Bill	09/30/2021		2000 Accounts Payable	481.16	39,121.09
Bill	10/01/2021		2000 Accounts Payable	8,671.94	47,793.03
Bill	10/31/2021		2000 Accounts Payable	409.14	48,202.17
Bill	11/01/2021		2000 Accounts Payable	15,506.36	63,708.53
Bill	11/30/2021		2000 Accounts Payable	454.81	64,163.34
Bill	12/01/2021		2000 Accounts Payable	9,315.82	73,479.16
Bill	12/31/2021		2000 Accounts Payable	409.31	73,888.47
General Journal	12/31/2021		2000 Accounts Payable	-44,369.13	29,519.34
General Journal	12/31/2021		2000 Accounts Payable	-29,095.44	423.90
Bill	01/31/2022		2000 Accounts Payable	466.00	889.90
Bill	02/12/2022		2000 Accounts Payable	10,501.90	11,391.80
Bill	02/28/2022		2000 Accounts Payable	505.67	11,897.47
Bill	03/01/2022		2000 Accounts Payable	10,546.37	22,443.84
Bill	03/31/2022		2000 Accounts Payable	344.19	22,788.03
General Journal	03/31/2022		2000 Accounts Payable	-11,377.21	11,410.82
General Journal	03/31/2022		2000 Accounts Payable	-10,986.92	423.90
Bill	04/01/2022		2000 Accounts Payable	10,653.96	11,077.86
Bill	04/30/2022		2000 Accounts Payable	277.34	11,355.20
General Journal	04/30/2022		2000 Accounts Payable	-10,931.30	423.90
Bill	05/01/2022		2000 Accounts Payable	10,773.30	11,197.20
General Journal	05/31/2022		2000 Accounts Payable	-17,691.52	-6,494.32
Bill	06/01/2022		2000 Accounts Payable	10,961.83	4,467.51
Bill	06/30/2022		2000 Accounts Payable	711.15	5,178.66
General Journal	06/30/2022		2000 Accounts Payable	-26,672.98	-21,494.32
Bill	07/01/2022		2000 Accounts Payable	11,216.52	-10,277.80
Bill	08/31/2022		2000 Accounts Payable	100.00	-10,177.80
Total Dimensions in Senior Living				-29,429.42	-10,177.80
JDC Solutions					0.00
Bill	11/01/2020		2000 Accounts Payable	200.00	200.00
Bill	12/01/2020		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	12/03/2020	9281	2000 Accounts Payable	-200.00	200.00
Bill	12/29/2020	Inv 522	2000 Accounts Payable	250.00	450.00
Bill	01/01/2021		2000 Accounts Payable	200.00	650.00
Bill Pmt -Check	01/07/2021	9328	2000 Accounts Payable	-450.00	200.00
Bill	02/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	02/26/2021	9363	2000 Accounts Payable	-400.00	0.00
Bill	03/01/2021		2000 Accounts Payable	200.00	200.00
Bill	04/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	04/30/2021	9397	2000 Accounts Payable	-400.00	0.00
Bill	05/01/2021		2000 Accounts Payable	200.00	200.00

Vendor Balance Detail
As of November 30, 2022

Type	Date	Num	Account	Amount	Balance
Bill	05/03/2021	961	2000 Accounts Payable	610.96	810.96
Bill Pmt -Check	05/25/2021	9426	2000 Accounts Payable	-610.96	200.00
Bill	06/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	06/10/2021	9444	2000 Accounts Payable	-200.00	200.00
Bill	07/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	07/07/2021	9476	2000 Accounts Payable	-200.00	200.00
Bill Pmt -Check	07/30/2021	9497	2000 Accounts Payable	-200.00	0.00
Bill	08/01/2021		2000 Accounts Payable	200.00	200.00
Bill	08/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	09/14/2021	9513	2000 Accounts Payable	-200.00	200.00
Bill	10/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	10/06/2021	9528	2000 Accounts Payable	-200.00	200.00
Bill	11/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	11/11/2021	9555	2000 Accounts Payable	-200.00	200.00
Bill	12/01/2021		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	12/08/2021	9576	2000 Accounts Payable	-200.00	200.00
Bill	12/28/2021	Inv 968	2000 Accounts Payable	250.00	450.00
Bill	01/01/2022		2000 Accounts Payable	200.00	650.00
Bill Pmt -Check	01/11/2022	9594	2000 Accounts Payable	-200.00	450.00
Bill	02/01/2022		2000 Accounts Payable	200.00	650.00
Bill Pmt -Check	02/07/2022	9601	2000 Accounts Payable	-200.00	450.00
Bill Pmt -Check	02/07/2022	9603	2000 Accounts Payable	-250.00	200.00
Bill	03/01/2022		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	03/16/2022	9627	2000 Accounts Payable	-200.00	200.00
Bill Pmt -Check	03/31/2022	9643	2000 Accounts Payable	-200.00	0.00
Bill	04/01/2022		2000 Accounts Payable	200.00	200.00
Bill	05/01/2022		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	05/09/2022	9655	2000 Accounts Payable	-200.00	200.00
Bill	06/01/2022		2000 Accounts Payable	200.00	400.00
Bill	06/07/2022	696	2000 Accounts Payable	1,071.07	1,471.07
Bill Pmt -Check	06/09/2022	9673	2000 Accounts Payable	-1,271.07	200.00
Bill	07/01/2022		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	07/18/2022	9681	2000 Accounts Payable	-200.00	200.00
Bill	08/01/2022		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	08/16/2022	9684	2000 Accounts Payable	-200.00	200.00
Bill	09/01/2022		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	09/21/2022	9697	2000 Accounts Payable	-200.00	200.00
Bill	10/01/2022		2000 Accounts Payable	200.00	400.00
Bill Pmt -Check	10/24/2022	9701	2000 Accounts Payable	-200.00	200.00
				200.00	200.00
					3,510.00
Bill	11/30/2020		2000 Accounts Payable	300.00	3,810.00
Bill	12/31/2020		2000 Accounts Payable	300.00	4,110.00
Bill	01/22/2021		2000 Accounts Payable	300.00	4,410.00
Bill	02/22/2021		2000 Accounts Payable	300.00	4,710.00
Bill	03/22/2021		2000 Accounts Payable	300.00	5,010.00
Bill	04/22/2021		2000 Accounts Payable	200.00	5,210.00

Total JDC Solutions
Michael E Wilcox

Vendor Balance Detail
As of November 30, 2022

	Type	Date	Num	Account	Amount	Balance
	Bill	05/24/2021		2000 - Accounts Payable	200.00	5,410.00
	Bill	07/02/2021		2000 - Accounts Payable	1,475.00	6,885.00
	General Journal	12/31/2021		2000 - Accounts Payable	-6,585.00	300.00
Total Michael E Wilcox					-3,210.00	300.00
Wilcox Professional Services						13,200.00
	General Journal	12/31/2021		2000 - Accounts Payable	-13,200.00	0.00
Total Wilcox Professional Services					-13,200.00	0.00
Wilcox Properties of Fort Calhoun						0.00
	Bill	11/29/2022	9763140	2000 - Accounts Payable	288.71	288.71
	Bill	11/29/2022	9763334	2000 - Accounts Payable	101.65	390.36
	Bill	11/29/2022	9763333	2000 - Accounts Payable	249.45	639.81
	Bill	11/29/2022	9763324	2000 - Accounts Payable	2,837.12	3,476.93
	Bill	11/29/2022	9763139	2000 - Accounts Payable	3,287.19	6,764.12
	Bill	11/29/2022	9763336	2000 - Accounts Payable	90.96	6,855.08
	Bill Pmt -Check	11/29/2022	9711	2000 - Accounts Payable	-6,855.08	0.00
Total Wilcox Properties of Fort Calhoun					0.00	0.00